

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	Report Filed By (Mark X)	Candidate	Committee	<input checked="" type="checkbox"/> Lobbyist
Name of Filing Committee, Candidate or Lobbyist: <u>Committee to Elect Kathy Fatcia</u>				
Street Address: <u>41623 Southern Dr</u>				
City: <u>Erie</u>	State: <u>PA</u>	Zip Code: <u>16506</u>		

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre-Election	5- 2 nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY): <u>11/07/2017</u>		Year: <u>2017</u>	Amendment Report: <input type="checkbox"/>		Termination Report: <input type="checkbox"/>			

Summary of Receipts and Expenditures	From Date: <u>6-5-17</u>	To Date: <u>10-23-17</u>	For Office Use Only
A. Amount Brought Forward From Last Report	\$	<u>746.85</u>	2017 OCT 24 PM 12:49 ERIE COUNTY VOTER REGISTRATION KA
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	<u>14,730.00</u>	
C. Total Funds Available (Sum of Lines A and B)	\$	<u>15,476.85</u>	
D. Total Expenditures (From Schedule III)	\$	<u>8,128.04</u>	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	<u>7,348.81</u>	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	<u>580.00</u>	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	<u>1,500.00</u>	

Affidavit Section

Part I- If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

23 day of October 20 17
Linda S. McCabe
 Signature

Signature of Person Submitting report

Kathy Fatcia
 Printed Name

 My Commission expires 4 24 21
 MO. DAY YR.

 My Commission Expires April 24, 2021
 Commission Number 1275541
 Area Code

909-5522
 Daytime Telephone Number

Part II- If this is a report of a Candidate's Authorized Committee, candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, NO.320) as amended.

Sworn to and subscribed before me this

23 day of October 20 17
Linda S. McCabe
 Signature

Signature of Candidate

Kathy Fatcia
 Printed Name

 My Commission expires 4 24 21
 MO. DAY YR.

 My Commission Expires April 24, 2021
 Commission Number 1275541
 Area Code

881-7370
 Daytime Telephone Number

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number		CTE Kathy Fatica
1. Unitemized Contributions and Receipts - \$50.00 or Less per Contributor		
Total for the reporting period	(1)	\$ 1065.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		
Contributions Received from Political Committees (Part A)		\$ 1000.00
All Other Contributions (Part B)		\$ 4165.00
Total for the reporting period	(2)	\$ 5165.00
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)		\$ 5500.00
All Other Contributions (Part D)		\$ 3000.00
Total for the reporting period	(3)	\$ 8500.00
4. Other Receipts: Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		
Total for the reporting period	(4)	\$ 0
Total Monetary Contributions and Receipts during this reporting period (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)		\$ 14,730.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD
DETAILED SUMMARY PAGE**

Filer Identification Number:	CTE Kathy Fatica
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the reporting period	(1)	\$

2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the reporting period	(2)	\$

3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the reporting period	(3)	\$

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F)		\$
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(580)

580

580

PART A

Contributions Received From Political Committees

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from Political Committees
with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Filer Identification Number	CTE Kathy Fatica
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						Amount
Full Name of Contributing Committee	Crie Firefighter PAC				Date [MM/DD/YYYY]	\$ 250.00
House #	Street Address				Date [MM/DD/YYYY]	\$
	PO Box 3576					
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
Crie	PA	16508				
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$	

250

PART A

Contributions Received From Political Committees

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from Political Committees
with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Filer Identification Number						Amount	
CTE Kathy Fatica							
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$		
CTE Sheriff John Loomis				08/25/17	\$	100.00	
House #	Street Address	Date [MM/DD/YYYY]		\$			
5706	Jones Lane			\$			
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Crie	PA	16506		\$			
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$		
Dameri for DA				8/27/17	\$	100.00	
House #	Street Address	Date [MM/DD/YYYY]		\$			
1509	Pasadena			\$			
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Crie	PA	16505		\$			
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$		
Crie AFL-CIO Cape Fund				9/5/17	\$	100.00	
House #	Street Address	Date [MM/DD/YYYY]		\$			
32	W 8 St. #604			\$			
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Crie	PA	16501		\$			
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$		
CTE Flo Fabrizio				8/31/17	\$	100.00	
House #	Street Address	Date [MM/DD/YYYY]		\$			
2417	Paplan			\$			
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Crie	PA	16505		\$			
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$		
Friends of Pat Furkin				9/6/17	\$	100.00	
House #	Street Address	Date [MM/DD/YYYY]		\$			
2463	Schley			\$			
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Crie	PA	16508		\$			
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$		
George Joseph (GPAC)				9/11/17	\$	250.00	
House #	Street Address	Date [MM/DD/YYYY]		\$			
2222	West Grandview			\$			
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Crie	PA	16506		\$			

(750.00)

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from
\$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number: CTE Kathy Fatica											
Full Name of Contributor: Ronald Di Nicola					Date [MM/DD/YYYY]: 9/21/17		S: \$		Amount: 200.00		
House #: 1001		Street Address: State St.			Date [MM/DD/YYYY]:		S:				
City: Cerie		State: PA		Zip Code: 16501		Date [MM/DD/YYYY]:		S:			
Full Name of Contributor: Michele Ridge					Date [MM/DD/YYYY]: 9/21/17		S: \$		Amount: 250.00		
House #: 3210		Street Address: Westwood Estates			Date [MM/DD/YYYY]:		S:				
City: Cerie		State: PA		Zip Code: 16506		Date [MM/DD/YYYY]:		S:			
Full Name of Contributor: Linda King					Date [MM/DD/YYYY]: 9/18/17		S: \$		Amount: 250.00		
House #: 320		Street Address: West 7 St.			Date [MM/DD/YYYY]:		S:				
City: Cerie		State: PA		Zip Code: 16502		Date [MM/DD/YYYY]:		S:			
Full Name of Contributor: Carol Perrotto					Date [MM/DD/YYYY]: 10/2/17		S: \$		Amount: 100.00		
House #: 382		Street Address: Bonnie Blue			Date [MM/DD/YYYY]:		S:				
City: Cerie		State: PA		Zip Code: 16511		Date [MM/DD/YYYY]:		S:			
Full Name of Contributor: Julie Slomski					Date [MM/DD/YYYY]: 9/22/17		S: \$		Amount: 100.00		
House #: 5510		Street Address: Mill Street			Date [MM/DD/YYYY]:		S:				
City: Cerie		State: PA		Zip Code: 16509		Date [MM/DD/YYYY]:		S:			
Full Name of Contributor:					Date [MM/DD/YYYY]:		S:				
House #:		Street Address:			Date [MM/DD/YYYY]:		S:				
City:		State:		Zip Code:		Date [MM/DD/YYYY]:		S:			

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from
\$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number: C T E Kathy Fatica							
Full Name of Contributor: Mary Weibler					Date: 9/10/17	\$	100.00
House #	34	Street Address: Widgea Pier		Date: [MM/DD/YYYY]	\$		
City	Erie	State	PA	Zip Code	16507	Date: [MM/DD/YYYY]	\$
Full Name of Contributor: Thomas Talarico					Date: 9/21/17	\$	250.00
House #	510	Street Address: Cranberry #301		Date: [MM/DD/YYYY]	\$		
City	Erie	State	PA	Zip Code	16507	Date: [MM/DD/YYYY]	\$
Full Name of Contributor: Joseph Maloney					Date: 9/21/17	\$	250.00
House #	401	Street Address: Glenrudeh		Date: [MM/DD/YYYY]	\$		
City	Erie	State	PA	Zip Code	16505	Date: [MM/DD/YYYY]	\$
Full Name of Contributor: James Schaffner					Date: 9/21/17	\$	250.00
House #	9343	Street Address: Hamat Rd		Date: [MM/DD/YYYY]	\$		
City	Waterford	State	PA	Zip Code	16441	Date: [MM/DD/YYYY]	\$
Full Name of Contributor: Robert Mieski					Date: 9/21/17	\$	100.00
House #	4424	Street Address: Hameland Blvd		Date: [MM/DD/YYYY]	\$		
City	Erie	State	PA	Zip Code	16509	Date: [MM/DD/YYYY]	\$
Full Name of Contributor: Michael Kudlak					Date: 9/21/17	\$	100.00
House #	4121	Street Address: Alisen Lane		Date: [MM/DD/YYYY]	\$		
City	Erie	State	PA	Zip Code	16506	Date: [MM/DD/YYYY]	\$

(1050.00)

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from
\$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number: CTE Kathy Fatica									
Full Name of Contributor: Al Richardson					Date [MM/DD/YYYY]: 9/7/17		S: \$100.00		
House #: 27		Street Address: Niagara Pier			Date [MM/DD/YYYY]:		S:		
City: Erie		State: PA		Zip Code: 16507		Date [MM/DD/YYYY]:		S:	
Full Name of Contributor: Mary Alice Doolin					Date [MM/DD/YYYY]: 8/5/17		S: \$150.00		
House #: 84		Street Address: Beach Haven			Date [MM/DD/YYYY]:		S:		
City: Erie		State: PA		Zip Code: 16505		Date [MM/DD/YYYY]:		S:	
Full Name of Contributor: Terry Craker					Date [MM/DD/YYYY]: 9/7/17		S: \$100.00		
House #: 5411		Street Address: Millfair			Date [MM/DD/YYYY]:		S:		
City: Fairview		State: PA		Zip Code: 16415		Date [MM/DD/YYYY]:		S:	
Full Name of Contributor: Patti Hayes					Date [MM/DD/YYYY]: 9/11/17		S: \$100.00		
House #: 5506		Street Address: Stone Run Dr.			Date [MM/DD/YYYY]:		S:		
City: Fairview		State: PA		Zip Code: 16415		Date [MM/DD/YYYY]:		S:	
Full Name of Contributor: Luigi Pasquale					Date [MM/DD/YYYY]: 9/10/17		S: \$70.00		
House #: 4551		Street Address: Neptune			Date [MM/DD/YYYY]:		S:		
City: Erie		State: PA		Zip Code: 16506		Date [MM/DD/YYYY]:		S:	
Full Name of Contributor: Erin Adair					Date [MM/DD/YYYY]: 9/14/17		S: \$250.00		
House #: 537		Street Address: Colleen Dr.			Date [MM/DD/YYYY]:		S:		
City: Erie		State: PA		Zip Code: 16505		Date [MM/DD/YYYY]:		S:	

Total: **\$770**

PART B
All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from
\$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Full Identification Number		C T E Kathy Fatica	
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Full Name of Contributor	Richard Krespan	Date (MM/DD/YYYY)	9/6/17	\$	70.00
House #	4645	Street Address	Budd	Date (MM/DD/YYYY)	
City	Erie	State	PA	Zip Code	16506
Full Name of Contributor	Leonard Andryewski	Date (MM/DD/YYYY)	9/5/17	\$	100.00
House #	4627	Street Address	Lantheim	Date (MM/DD/YYYY)	
City	Erie	State	PA	Zip Code	16506
Full Name of Contributor	Bob + Gretchen Bach	Date (MM/DD/YYYY)	9/2/17	\$	70.00
House #	4632	Street Address	Dancie Dr	Date (MM/DD/YYYY)	
City	Erie	State	PA	Zip Code	16506
Full Name of Contributor	Richard Dreyfus	Date (MM/DD/YYYY)	9/6/17	\$	100.00
House #	98	Street Address	Beachhaven Lw.	Date (MM/DD/YYYY)	
City	Erie	State	PA	Zip Code	16506
Full Name of Contributor	Rich Scott	Date (MM/DD/YYYY)	9/2/17	\$	100.00
House #	1552	Street Address	South Shore Dr	Date (MM/DD/YYYY)	
City	Erie	State	PA	Zip Code	16505
Full Name of Contributor	Chad Vileshis	Date (MM/DD/YYYY)	9/4/17	\$	250.00
House #	6009	Street Address	Lakeshore Dr.	Date (MM/DD/YYYY)	
City	Erie	State	PA	Zip Code	16505

Total \$690

PART C

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

OVER \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value over \$250.00 in the reporting period.

Name of Filing Committee or Candidate				Reporting Period			
CTE Kathy Fatica				From 6-5-17 To 10-23-17			
				DATE			AMOUNT
Full Name of Contributing Committee				MO	DAY	YEAR	
Northwest Hood General PAC				08	11	17	\$ 2500.00
Mailing Address				MO	DAY	YEAR	
100 State Street #440				10	20	17	\$ 2500.00
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
Erie		PA	16502				\$
Full Name of Contributing Committee				MO	DAY	YEAR	
CTE Ryan Bynarro				10	4	17	\$ 500.00
Mailing Address				MO	DAY	YEAR	
6350 Meadowview Lane							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
Erie		PA	16505				\$
Full Name of Contributing Committee				MO	DAY	YEAR	
							\$
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
			-				\$
Full Name of Contributing Committee				MO	DAY	YEAR	
							\$
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
			-				\$
Full Name of Contributing Committee				MO	DAY	YEAR	
							\$
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
			-				\$
Full Name of Contributing Committee				MO	DAY	YEAR	
							\$
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
			-				\$
Full Name of Contributing Committee				MO	DAY	YEAR	
							\$
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
			-				\$
Full Name of Contributing Committee				MO	DAY	YEAR	
							\$
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
			-				\$

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL

\$ 5500.00

PART D
All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

Filer Identification Number	CTE Kathy Fatica
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Full Name of Contributor				Date [MM/DD/YYYY]		\$	#
Thomas Hagen				8/14/17		\$	2500.00
House #	5727	Street Address		Date [MM/DD/YYYY]		\$	
		Crumbo Rd P.O. Box 10905				\$	
City	Cire	State	PA	Zip Code	16506 16514	Date [MM/DD/YYYY]	\$
Employer Name				Occupation			
Custom Engineering							
Employer Mailing Address / Principal Place of Business				2800 McClelland Cire, PA 16510			
Full Name of Contributor				Date [MM/DD/YYYY]		\$	#
Michael Vasinachy				9/15/17		\$	500.00
House #	5848	Street Address		Date [MM/DD/YYYY]		\$	
		Forrest Xing				\$	
City	Cire	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	\$
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor				Date [MM/DD/YYYY]		\$	
						\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
						\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor				Date [MM/DD/YYYY]		\$	
						\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
						\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							

3000

PART E

Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Filer Identification Number	
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Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	S
Receipt Description								
Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	S
Receipt Description								
Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	S
Receipt Description								
Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	S
Receipt Description								
Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	S
Receipt Description								
Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	S
Receipt Description								

SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number: CTE Kathy Fatica									
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Full Name of Contributor: JAMES PERROTTO					Date [MM/DD/YYYY]: 9/21/17	\$	200.00
House #	Street Address		State	Zip Code	Date [MM/DD/YYYY]	\$	
382	Bonnie Bae		PA	16511			
City	Employer Name		State	Zip Code	Date [MM/DD/YYYY]	\$	
Erie			PA	16511			
Employer Mailing Address / Principal Place of Business: J. Perrotto DJ Services					Occupation: D.J.		
					Description of Contribution: DJ Services for fundraiser		

Full Name of Contributor: Senior News					Date [MM/DD/YYYY]: 10/1/17	\$	190.00
House #	Street Address		State	Zip Code	Date [MM/DD/YYYY]	\$	
3714	Zuck Rd		PA	16506	10/10/17		190.00
City	Employer Name		State	Zip Code	Date [MM/DD/YYYY]	\$	
Erie			PA	16506			
Employer Mailing Address / Principal Place of Business					Occupation		
					Description of Contribution: Newspaper Ad.		

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #	Street Address		State	Zip Code	Date [MM/DD/YYYY]	\$	
City	Employer Name		State	Zip Code	Date [MM/DD/YYYY]	\$	
Employer Mailing Address / Principal Place of Business					Occupation		
					Description of Contribution		

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #	Street Address		State	Zip Code	Date [MM/DD/YYYY]	\$	
City	Employer Name		State	Zip Code	Date [MM/DD/YYYY]	\$	
Employer Mailing Address / Principal Place of Business					Occupation		
					Description of Contribution		

1580

SCHEDULE III
STATEMENT OF EXPENDITURES

PAGE OF

Name of Filing Committee or Candidate <div style="font-size: 1.2em; font-family: cursive;">CTE Kathy Fatica</div>	Reporting Period From <u>6-5-17</u> To <u>10-23-17</u>
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To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">Staples</div>			MO <u>06</u>	DAY <u>11</u>	YEAR <u>17</u>	Amount \$ <u>101.02</u>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">1902 Keystone Drive</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">Post Cards - Printed</div>			
City <div style="font-size: 1.2em; font-family: cursive;">Crie</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">16509</div>	<div style="font-size: 1.2em; font-family: cursive;">Postage</div>			
To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">Creative Imprints</div>			MO <u>06</u>	DAY <u>26</u>	YEAR <u>17</u>	Amount \$ <u>348.00</u>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">2670 West 11 St.</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">T-Shirts</div>			
City <div style="font-size: 1.2em; font-family: cursive;">Crie</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">16505</div>				
To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">Scotish Rite</div>			MO <u>08</u>	DAY <u>14</u>	YEAR <u>07</u>	Amount \$ <u>100.00</u>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">4701 Old Zuck Rd/PO Box 9007</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">deposit on room</div>			
City <div style="font-size: 1.2em; font-family: cursive;">Crie</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">16505</div>				
To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">Wegmans (K)</div>			MO <u>8</u>	DAY <u>13</u>	YEAR <u>17</u>	Amount \$ <u>9.80</u>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">5028 West Lige Rd</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">postage</div>			
City <div style="font-size: 1.2em; font-family: cursive;">Crie</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">16506</div>				
To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">Sams Club (K)</div>			MO <u>8</u>	DAY <u>14</u>	YEAR <u>17</u>	Amount \$ <u>65.36</u>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">7200 Peach St</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">postage, envelope</div>			
City <div style="font-size: 1.2em; font-family: cursive;">Crie</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">16509</div>	<div style="font-size: 1.2em; font-family: cursive;">cups</div>			
To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">Fine Wine + Spirits (K)</div>			MO <u>8</u>	DAY <u>13</u>	YEAR <u>17</u>	Amount \$ <u>32.81</u>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">2503 Ashbury Rd</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">MC Dem supplies</div>			
City <div style="font-size: 1.2em; font-family: cursive;">Crie</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">16506</div>	<div style="font-size: 1.2em; font-family: cursive;">for picnic</div>			
To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">Fine Wine + Spirits (K)</div>			MO <u>8</u>	DAY <u>9</u>	YEAR <u>17</u>	Amount \$ <u>47.65</u>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">2503 Ashbury Rd</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">MC Dem Supplies</div>			
City <div style="font-size: 1.2em; font-family: cursive;">Crie</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">16506</div>	<div style="font-size: 1.2em; font-family: cursive;">for picnic</div>			
To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">Staples</div>			MO <u>08</u>	DAY <u>29</u>	YEAR <u>17</u>	Amount \$ <u>56.22</u>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">1902 Keystone Dr.</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">copies & printer ink</div>			
City <div style="font-size: 1.2em; font-family: cursive;">Crie</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">16509</div>				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL \$ <u>760.86</u>

SCHEDULE III
Statement of Expenditures

6-5-17 to 10/23/17

Filer Identification Number		CTE Kathy Fatica			
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To Whom Paid	County of Erie			Date (MM/DD/YYYY)	9/14/17	\$	38.00
House #	Street Address	City	State	Zip Code	Description of Expenditure		
	W 6 St.	Erie	PA	1650	Copies + CA		

To Whom Paid	Friends of Kathy Ballhoun			Date (MM/DD/YYYY)	9/14/17	\$	15.00
House #	Street Address	City	State	Zip Code	Description of Expenditure		
612	W 2 St.	Erie	PA	16507	Fund Raiser		

To Whom Paid	Sams Club			Date (MM/DD/YYYY)	6/15/17	\$	59.48
House #	Street Address	City	State	Zip Code	Description of Expenditure		
200	Leach	Erie	PA	16509	parade supplies		

To Whom Paid	Wal-Mart			Date (MM/DD/YYYY)	8/23/17	\$	22.97
House #	Street Address	City	State	Zip Code	Description of Expenditure		
6360	West Ridge Rd	Erie	PA	16506	printer ink		

To Whom Paid	Sams Club			Date (MM/DD/YYYY)	9/2/17	\$	86.41
House #	Street Address	City	State	Zip Code	Description of Expenditure		
3750	W. Market St.	Fairlawn	OH		fundraiser supplies		

To Whom Paid	Wine & Spirits			Date (MM/DD/YYYY)	9/17/17	\$	71.48
House #	Street Address	City	State	Zip Code	Description of Expenditure		
2501	W 12 St.	Erie	PA	16505	fundraiser supplies		

To Whom Paid	Staples			Date (MM/DD/YYYY)	9/21/17	\$	38.13
House #	Street Address	City	State	Zip Code	Description of Expenditure		
1902	Keystone	Erie	PA	16509	fundraiser supply		

To Whom Paid	Scattick Lite			Date (MM/DD/YYYY)	9/21/17	\$	480
House #	Street Address	City	State	Zip Code	Description of Expenditure		
4701	Old 2nd Rd	Erie	PA	16506	hall rental fundraiser		

811.417

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <i>CTE Kathy Fatica</i>				Reporting Period From <i>6-5-17</i> To <i>10/23/17</i>			
To Whom Paid <i>Cali's West</i>				MO. <i>9</i>	DAY <i>23</i>	YEAR <i>17</i>	Amount \$ <i>1,904.76</i>
Mailing Address <i>3826 West Ridge Rd</i>				Description of Expenditure <i>food & beverages for fundraiser</i>			
City <i>Crie</i>		State <i>PA</i>	Zip Code (Plus 4) <i>16506-</i>				
To Whom Paid <i>Millcreek Democratic Committee</i>				MO. <i>10</i>	DAY <i>16</i>	YEAR <i>17</i>	Amount \$ <i>240.00</i>
Mailing Address <i>610 3506 Hershey Rd</i>				Description of Expenditure <i>Political Dinner</i>			
City <i>Crie</i>		State <i>PA</i>	Zip Code (Plus 4) <i>16506</i>	<i>EC & P Beef Ballot</i>			
To Whom Paid <i>Crie Reading</i>				MO. <i>10</i>	DAY <i>16</i>	YEAR <i>17</i>	Amount \$ <i>192.50</i>
Mailing Address <i>1001 State St</i>				Description of Expenditure <i>campaign ad</i>			
City <i>Crie</i>		State <i>PA</i>	Zip Code (Plus 4) <i>16501-</i>				
To Whom Paid <i>McCarty Printing</i>				MO. <i>10</i>	DAY <i>19</i>	YEAR <i>17</i>	Amount \$ <i>3289.57</i>
Mailing Address <i>246 E 7 St.</i>				Description of Expenditure <i>postage for mailed</i>			
City <i>Crie</i>		State <i>PA</i>	Zip Code (Plus 4) <i>16503</i>				
To Whom Paid <i>McCarty Printing</i>				MO. <i>10</i>	DAY <i>19</i>	YEAR <i>17</i>	Amount \$ <i>262.88</i>
Mailing Address <i>246 E 7 St.</i>				Description of Expenditure <i>flyers</i>			
City <i>Crie</i>		State <i>PA</i>	Zip Code (Plus 4) <i>16503</i>				
To Whom Paid <i>Crie Times News</i>				MO.	DAY	YEAR	Amount \$ <i>666.00</i>
Mailing Address <i>205 W 12 St</i>				Description of Expenditure <i>campaign ad</i>			
City <i>Crie</i>		State <i>PA</i>	Zip Code (Plus 4) <i>16504</i>				
To Whom Paid				MO.	DAY	YEAR	Amount \$
Mailing Address				Description of Expenditure			
City		State	Zip Code (Plus 4)				
To Whom Paid				MO.	DAY	YEAR	Amount \$
Mailing Address				Description of Expenditure			
City		State	Zip Code (Plus 4)				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ *6555.71*

SCHEDULE IV

Statement of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer Identification Number							
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Name of Creditor					Outstanding Balance of Debt		
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$			
4623	Southern Dr	02/28/2017		\$	\$1500.00		
City		State	Zip Code				
	Erie	PA	16506				
Description of Debt							
Campaign start up for expenses.							

Name of Creditor					Outstanding Balance of Debt		
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$			
				\$			
City		State	Zip Code				
Description of Debt							

Name of Creditor					Outstanding Balance of Debt		
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$			
				\$			
City		State	Zip Code				
Description of Debt							

Name of Creditor					Outstanding Balance of Debt		
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$			
				\$			
City		State	Zip Code				
Description of Debt							

Name of Creditor					Outstanding Balance of Debt		
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$			
				\$			
City		State	Zip Code				
Description of Debt							